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APPLICANTS

Takayuki Noda, Saitama City, JAPAN;

** CONTINUING DATA ***** None (M.H.)

** FOREIGN APPLICATIONS ***** yes (M.H.)
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance M.H.	STATE OR COUNTRY JAPAN	SHEETS DRAWING 13	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
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Verified and Acknowledged
 Examiner's Signature Initials

ADDRESS
 Arnold International
 P.O. Box 129
 Great Falls , VA
 22066

TITLE
 TWO-GROUP ZOOM LENS

FILING FEE RECEIVED 1070	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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